Medical

G. R.

Pre

1915.

Medl)

File No. 71-15

Serial Nos. 5, 7, 8, 9, 10, 11

Later references.

Rev Gen-22 Vol = 3

A

GENERAL AND REVENUE SECRETARIAT.

Serial Nos. 5, 7, 8, 9, 10, 11

Part B for July 17

SUBJECT.

Medical relief in rural areas

SC 11

S45-50 dt 27.7.15

To. The Senior Surgeon Etc

Approves of the curricula of studies in the Ayurvedic college for training rural medical practitioners.

W D 1250—GPB—30,000 28-1-19

(G. R. S. 11) 1915-6

GENERAL AND REVENUE SECRETARIAT.

(Medical)

NOTES.

File No. 71-15

FILE HEADING.

Note on the "Problem of medical relief" by Diwan Bahadur J. S. Chakravarti, Campholler, Mysore yast.

From

The Campholler

No. 3468/A198 Dated 11/12.11.15 Received 13.11.15

Diary No. 1818	Enclos. 1 · Spare Copies.	Serial No. 5

BRIEF ABSTRACT OF LETTER.

Requests that the principle of Scheme outlined in his note on "Problem of medical relief" may be sanctioned and the details ordered to be worked out by a Committee Constituted as proposed.

NOTES AND ORDERS.

The Scheme suggested by the Campholler may be briefly summarized as follows:—

At each Hobli Head Quarters and in each ~~Adcare~~ important village there should be a medical man

NOTES—First Sheet.

GPB—20,000—8-8-14

Serial No.

of the class of native Pandits with a Stock of medicines and appliances. The Hobli doctor - as he is called - will be a sort of first-aid man in all his spheres of work (including Vaccination & inoculation), taking upon himself the treatment of only the simplest cases. The Govt should maintain a mobile staff of about 50 men to be sent out under suitable guidance to Combat against epidemics.

The cost of each Hobli doctor may be about Rs 35 per mensem (Rs 20 to 30 towards pay & the balance towards Contingencies etc). The Hobli doctor's earnings by giving advice treatment & medicine to those who can afford to pay, may be estimated at Rs 10 per mensem half of which should go to the doctor himself and the other half to the Village Improvement Funds from which he is to be maintained. This Scheme is proposed to be introduced first in richer hobblis & villages and gradually extended to the poorer parts as organization develops and funds permit.

(2) To give effect to the Scheme information on the following points seems to be necessary:-

(i) What is the standard of qualification

NOTE—Contn. sheet.

GPB—20,000—30-6-15.

(3

618

G. R. S. 12]

General and Revenue Secretariat.

Fd) File No. 71 of 1915-6

Serial No.

to be expected of men that may be appointed as Hobli Doctors.

(ii) How many qualified men there are already available for employment and how many are under training in the Mysore Ayurvedic college and what steps should be adopted to procure the remaining number of men required for service

(iii) The names of the Hobbies and the villages in which the Scheme should be started.

3. Before appointing a (Committee) as proposed by the Comptroller the Financial Branch may, if appd, be Consulted in regard to the Scheme in general and the extent to which funds may be made available for the Scheme out of the grant for village improvement.

Subd for orders.

Bdn-39 16.11.15

4) The main features of the Scheme may be Summarised as follows:

(i) At each Hobli head-quarters and at each important Village there should be a Hobli-Doctor who should be a sort of physician - Surgeon - mid-wife - Vaccinator - inoculator & Veterinarian all in one of an Elementary order.

The printed note referred to in the paper under disposal has not been received; but one of the copies sent to Mr. S. Ramachandra Rao at Mysore, is placed in the file.

Bdn-39 16.11.15

NOTE—Contn. sheet.

GPB—20,000—30-6-15.

Serial No.

In addition to this there must be a mobile staff of about 50 such men to deal with emergencies such as out-break of epidemics Etc.

It is calculated that about 400 men would be required for the Whole State

(ii) These men should be trained in a special institution for a Course of period of 2 years before they are sent out.

Students who have re[redacted]d up to the Lower Secondary, may do The point is the men selected should be such as will be content to live as Villagers among Villagers on a modest income.

(iii) The training to Comprise (a) diagnosis of Simple medical cases (b) Knowledge and use of indigenous medicinal plants and herbs (c) first aid (d) Surgical treatment under Antiseptic Conditions of superficial abcesses Etc (e) Midwifery and the treatment of infants (f) practical hygiene and Sanitation (g) Elementary Veterinary

GPB—20,000—30-6-15.

General and Revenue Secretariat. | Med File No. 71 of 1915-6

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Science — all in the Vernacular.

(iv) Cost of the scheme. The pay of a Hobli Doctor is to be about Rs 25 p.m. with an allowance of Rs 10 for medicines to be paid out of Village Improvement Funds. The Hobli Doctors may also be allowed private practice, half the fees to be appropriated by them and half to go to the Village Improvement Fund.

5) There are certain features about the scheme which require further elucidation.

(i) Whether training for 2 years is enough to give a knowledge in all these subjects

(ii) Where the Students are to be trained. The Cost of training has not been taken into account. This is an important factor, and is likely to be very heavy

(iii) There are already native pundits & quacks in several Villages - whose medical qualifications tho' of a doubtful order Still Command some amount of practice. It is for Consideration to what extent the new ~~Village~~ Hobli Doctors will supplant

NOTE—Contn. sheet.

GPB—25.000—2-12-14

G. R. S. 12]

General and Revenue Secretariat. | 2nd File No. 71 of 1915-6

Serial No.

these local doctors. It is also a point for consideration why these local doctors should not be induced to undergo training by the offer of inducements in the shape of Scholarships a guaranteed appointment etc.

(iv) The relation between these Hobli Doctors and the taluk Sub Asstt Surgeons, and the District Surgeon has not been defined. It is very necessary that these men should be placed under some sort of disciplinary control, otherwise they may do more harm than good by their irresponsible Conduct.

6) These are all however questions of detail which will perhaps be considered by the Committee proposed to be appointed. What is now wanted is merely general sanction to the principle of the scheme & permission to have the details worked out by a Committee consisting of the Senior Surgeon (President), the Revenue Commr, a non-official Gentleman, and Mr Chatterji. Both these may be accorded, and

NOTE—Contn. sheet.

(7

General and Revenue Secretariat. | Med File No. 71 of 1915-16

Serial No.

the Scheme further considered on receipt of Senior detailed proposals.
Secy)
Mon 20/1

To be treated as an urgent case until disposal
Secy

1) A draft may be suggested. Secy 7/12 Mon 7.12

MRD 11

2) Draft submitted
Sd Mus Secys
8.12.15

MRD 9/1

9) Please put up a brief draft as revised & amplified. Mon 9/12

10) Draft Submitted
Sd Mus Secy
9.12.15

Mon 10/12

11) MM 18/12/15 Mon 23/12

Extract sent to Members
D Swan

Received 12.30 p.m. Mus 23/12/15

12) The file should better be referred unofficially to the Senior Surgeon for his opinion.

DNDW 20.12.15

13) Referred with Compliments to the Senior Surgeon for his opinion

15) [signature] 29/12/15 Mon 23/12

No. No. 113 of 15.
Sd) 23.12.15.

NOTE—Contn. sheet.

GPB—25,000—23-3-15

14) Instead of employing 400 men with a smattering knowledge of Medicine, Surgery, Midwifery and Sanitation at a cost of Rs.35/-each per month, all over the State, I would recommend the employment of fully qualified medical Subordinates in particularly sickly Hoblies, in consultation with the District Boards concerned.

15) The in-patient wards provided in the Taluk Head Quarter Dispensary ~~will be made~~ are available for in-patients from Hoblies of the Taluk.

16) The Hobli medical subordinates may be supplied only with the most necessary drugs and instruments. The Local Fund Dispensaries at Taluk Head Quarters, if supplied with extra quantities of medicines they could be used by the Hobli medical subordinates as their stores, when their own supply is spent.

17) Even these fully qualified medical subordinates cannot be expected to do away with the necessity for employing trained midwives. In rural areas and particularly among uneducated classes, even in extremely difficult cases that cannot be managed by a midwife, a male will not be allowed to attend on a woman in labor.

18) The views of villagers and uneducated people in this matter may change; but it will be ~~agee~~ some years before the change could be expected.

J. V. Chrimmegowda
Senior Surgeon.

30.12.15.

9

411

GPB—20,000—30-6-15.

Serial No.

19) Subtd with the U.O reply from the Senior Surgeon. Vide paragraph 12 supra.

Adm-39
5.1.16 Genl Secy

Hm 7/1

20) A tidy draft as revised may be put up: (Typed)

Dewan 16/1

KS 17.1

21) Tidy draft submitted -

KS
18/1/16.

KS 18/1

22) Sd/
A draft is submitted for favour of consideration and orders

Dewan 20/1

Standing member Dewan

23) Draft approved.

24) The scheme submitted by Mr. Aravamudu Iyengar suggesting the employment of Pandits trained in the Ayurvedic College, Mysore, for affording medical relief in rural areas may also be referred to the same Committee for investigation and report.

21.1.16.

Hm 22/1

25) The question may be discussed at a meeting of Council

25.1.16 KO

3801
22.1.16

x Sl 6 note by the Munzrai Supdt

GPB—20,000—30-6-15

26) 10

Extract from the Proceedings of the 374th Meeting of the Council of His Highness the Maharaja, held at Bangalore, on the 2nd February 1916

434-1

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8. SUBJECT.- (Clause viii of the Schedule).

Extension of Ayurvedic medical aid to the interior parts of the State; and

Mr. Chakravarti's note on medical relief.

OPINION OF THE COUNCIL.

The draft order may be approved.

Sd. M.VISVESVARAYA,

Dewan of Mysore.

"EXTRACT"

D. M. Narayanaswami

Secretary to Government,
General Department.

W. D. 1361—GPB—500—11-12-15

[G. R. S. 12]

C. 143/3.2.16 (11

General and Revenue Secretariat.

Med File No. 71 of 1915-16

Serial No.

27) Extract from the Proceedings of the Council is put up.

Forwarded with compliments to the Secretary to Government, Revenue Department for favour of necessary further action.

By Order,

D. M. Narasinga Rao 3/2

Secretary to Government,
General Department.

Br VII

MM 8/2/16

28) It is a point for consideration whether further action is not more appropriately taken by the Medical Section (Br. IV)

Rev. Secy) 4.2.16

29) I thought so too as the Rayl. order is signed by the Secy. Secl & Sept. & it is for the Secl Secy to settle its point Secretary. MM 4/2/16

NOTE—Contn. sheet.

W. D. 135—GPB—200—20-7-15

G. R. S. 12]

General and Revenue Secretariat.

Ind. File No. 71 / 12 of 1915-16

Serial No.

30) Forwarded with Compliments to the General Secretary for Consideration as to the Branch from which the orders should issue. As the subject matter concerning the extension of medical relief in the Consideration wherein the Mysore Suppl. note forms only one of two alternative courses, it would appear more appropriate if further action is taken in Br. IV. The appended draft appears to require a few verbal changes consequent upon the members' alterations.

4.2.16 for Rev. Secy.

31) Magistrate from Br IV

8/2

32)

To the Comptroller, the Senior Surgeon, the Rev. Commr the Mysore Suppl. & Mr. P. S. Achyuta Rao.

G.O. No. 5926-30 dt 12.2.16

Appoints a Committee to thoroughly examine the Scheme for Medical Relief, elaborate details and submit definite recommendations on or before 30.6.16.

7

NOTE—Contn. sheet

GPB—70,000—17-12-15

General and Revenue Secretariat. | Med File No. 71 of 191 5-6

Serial No.	
8	33 Letter no: G 500 of 5.5.16 from the Senior Surgeon forwards with refer to Sl: 7 the report of the Committee appointed therein on the several questions referred to them and submits his individual views also on the subject together with a memorandum by Mr. Q.S. Achyuta Rao. 34 The following is a brief Summary of the ~~report of the~~ Committee's report:— (1) The institution called "the Training Institution for rural medical practitioners" is to be started immediately. Course of instruction to extend to two years. A guarantee of appointment on Rs 20-1-30 to be held out to Students who Complete the two years training Satisfactorily. The initial and recurring expenditure on account of the ~~Scheme~~ institution are estimated at Rs 5000 and Rs 15,600 respectively. For details vide Appendix B of the report. (2) After the Completion of two years Course in the Training Institution, a further Course of two years training is to be given to ~~Teachers~~ those who want to get a high class Ayurvedic training. The present Ayurvedic College to be transferred to Bangalore and hereafter called "the Ayurveda Vidyalaya". Candidates passing the final examination from the Vidyalaya to be given a diploma as "Ayurveda Vidwan" and employed on a Salary of Rs 30-1-40.

NOTE—Contn. sheet

Serial No.

The initial cost is estimated at Rs 3000 for laying out a herb garden and the recurring expenditure is estimated at Rs 5658 per annum against Rs 7480 now spent annually on the Mysore Ayurvedic College.

35) The Senior Surgeon is of opinion that the cost of the Scheme suggested by the Committee is out of all proportion to the utility of the "Rural practitioners" turned out and suggests the training of 40 more Sub Asst Surgeons for employment in specially unhealthy and out-of the way places. The cost of training 40 Sub Asst Surgeons is estimated at Rs 33000 for 4 years or Rs 8250 per annum against Rs 15600 the estimated cost of the institution for training Rural Med[l] Practitioners. He adds that if a Medical School is established in the State arrangement may be easily made to give to the Sub Asst Surgeons trained in the Med[l] School an addl 6 months' or a years Course in the Unani or Ayurvedic System of medicine in the local Ayurvedic College.

36) Mr P. S. Achyuta Rao has sent up a memorandum in which he has suggested that before the training institution for rural medical practitioners is started, it is necessary to ascertain (1) whether the Local Boards agree to meet their share of expenditure

NOTE—Contn. sheet.

/15

G. R. S. 12]

General and Revenue Secretariat. | Med File No. 71 of 1915-16

Serial No.

(2) What class books in Canarese are available for teaching Anatomy, Physiology, materia medica? He considers that- Mysore is better suited for locating the Ayurvedic College than Bangalore and adds that- there is no hurry to Start the School by 1st June '16 and that- all the details may be definitely settled before actually Starting the School.

37) Submitted for orders- [As questions relating to the Ayurvedic College are dealt with in Municipal Branch, it- is for consideration whether the details relating to the proposed School may not- be worked out in that Branch]

Addn-39 12/5/16

Dr 16/5/16

38) I beg to subscribe to the Secy Surgeon's views, but would however respectfully suggest that the Question may be referred to the Dr for his views. Perhaps the Working week may be awaited for the discussion of the question

Secy 19/5-16

39) A sum of Rs 15600 + Rs 3000 may be provided in the budget for 16-17, pending consideration of the scheme. It- is hardly possible to settle the numerous questions raised before the end of the current official year. Even if possible, it is not-

..... sheet.

(16

G. R. S. 12]

General and Revenue Secretariat.

Med File No. 71 of 1915-6

Serial No.

desirable to rush through the scheme which requires examination in several respects.

Standing Member & Dewan

Dewan 24/5

24/5-16

40) A sum of Rs.15,600/- for the Training Institution for Rural Medical Practitioners and a lump-sum grant of Rs.3,000/- for laying out a herb - - garden for the Ayurvedic College, may be provided in the budget for 1916-17.

41) I agree with the Secretary that it is undesirable to rush through the scheme as there is - difference of opinion among the Members of the Committee. It is not explained in the report of the Committee why the men trained in the Ayurvedic College may not be employed for administering medical relief in rural areas as proposed by Mr.Aravamudu Iyengar. The new curriculam introduced into the college some years back includes instruction in - Anatomy and Physiology and the European system of medicine and it may be further modified by including such other subjects as may be necessary. The additional recurring charges, if any, required for this purpose will be small and the students trained are not likely to be less serviceable or more -

NOTE—Contn. sheet.

(17

G. R. S. 12]

General and Revenue Secretariat. | Med File No. 71 of 1915-6

Serial No.

expensive than those trained under the scheme recommended by the Committee.

42) The Senior Surgeon suggests that about forty candidates may be trained as Sub Assistant Surgeons and placed in charge of dispensaries to be opened in specially unhealthy Hoblies and adds that the cost of training them will be only half the estimated cost of the scheme recommended by the Committee. This seems also to be a good idea provided Government can bear the additional recurring charges which their employment involves.

43) If the Dewan agrees, the file may be circulated to the other Members and brought up at a meeting of the Council. In the meantime, the President may be asked to state the grounds, if any, on which the Committee decided to have two separate courses of training first under the English system and then under the Ayurvedic system and did not approve of the course of training now given in the Ayurvedic College in which the two systems are combined.

31.5.16.

6528 5.6.16

44) There are many points in these proposals which require further consideration before any practical action can be taken.

576-16

NOTE—Contn. sheet

GTB—70,000—17-12-15

G. R. S. 12]

General and Revenue Secretariat.	Med. File No. 71 of 1915-6.

Serial No.

45) Please circulate and bring up at a meeting.

C.S. Qua 21/6

20.6.16. dd

Pl 21/6-16

46)

I think opportunity should be sought immediately to start a medical school [illegible] with the largest grant available - as Spl Committee [illegible] of the Secretaries, one non official & Dr Muthuraya, attached to the Dept of Training

G 5.6

NOTE—Contn. sheet.

3982

(19

G. R. S. 12]

General and Revenue Secretariat. | Medl. File No. 71 of 1915.

Serial No.

47) Extract from the Notes of discussion in Council on the 3rd August 1916. (Provisional)

" It is not considered desirable to shift the Ayurvedic College from Mysore to Bangalore. ...

The Committee may be asked whether the Ayurvedic College at Mysore does not already include provision for training in western system and whether, if not, the curriculum may not be suitably revised. "

(About opening of a Medl. School, vide Medl 137-15)

Draft
4/8/16
HG
5/8-16

48) Re-Subt for orders with refce to the routine note by the Surgeon Supdt & Secy to the Ayurvedic college Committee.

Adm-39
16.8.16

49) Lecturing to the curriculum of studies in the Ayurvedic College include instruction in English in Anatomy & Physiology in the 1st year, Materia Medica & Medicine in the 2nd year, Midwifery & Hygiene the third year & Surgery (without operations), Pharmacy & Chemistry the 4th year.

HG
17/8-16

50) This will have to be placed before the Council again.

Dewan
19/8

Pl. Secy.
Extraordinary Member
& Dewan

HG
19/8-16

NOTE—Contn. sheet.

GPB—70,000—17.12.15

1543

(20

G. R. S. 12]

General and Revenue Secretariat. | Med File No. 71 of 1915-6

Serial No.

51 It is seen from Mr. Aravamudu Iyengar's note and the curriculam of studies in the Ayurvedic College that some training in the Western system of - - medicine is already given in the college. The opinion of the Committee may be obtained as per Council resolution and the file circulated on receipt thereof.

A.S. will do this and put up

23.8.16.

Draft MP 24/8/16

5.) Draft submitted.

Rdn-39 25.8.16 MP.

5a) 25.8.16

5b) Draft MP 25/8/16

To The Senior Surgeon. Letter no: 1599 dt 26.8.16

9 With refce to Sl.8 requests that the opinion of the Committee as to whether the curriculum of studies in the Ayurvedic College may not be suitably revised so as to better fit the men trained therein for employment as rural medical practitioners may be obtained and submitted to Govt.

10 5c) Letter no: dt 149 dt 14/15.11.16 from the Senior Surgeon

Details the curriculum suggested by the Rural Medical Relief Committee for adoption in the case of students of the Ayurvedic Vidyasala.

5d) Submitted with refce to paragraphs 47 & 51 above.

Rdn-39 18.11.16 Gen: Secretary)

P. M. 20.11.16

Council matter.

NOTE—Contn. sheet. C.S. 25/12 cir

29/12

MP 29/12/16

GPH—79,000—17-12-15

(For disposal at meeting)

(57

No. C. 570

24.6. 191.6

GENERAL AND REVENUE SECRETARIAT.

Council Matter.

SUBJECT.

(Outside the Schedule).

Report of the Committee appointed to consider the question of 'Rural Medical Relief.

CIRCULATED TO THE MEMBERS OF COUNCIL.

By Order,

D. M. Nanayakkara

23rd June 191 6.

Secretary to Government.

Extraordinary Member of Council. Opinion recorded.

286
28.6

First Member of Council. 24.6

1102
24.6.16

Second Member of Council.

WD 2012—GPB—1 000—9 2-16

(Informal) (55) No. C. / (52)

6. 1. 1917.

(For disposal at a meeting)

GENERAL AND REVENUE SECRETARIAT.

Council Matter.

SUBJECT.

Proposals for the revision of the course of studies in the Ayurvedic College.

CIRCULATED TO THE MEMBERS OF COUNCIL.

By Order,

D. M. Narayanan

3rd January 1917. *Secretary to Government.*

Extraordinary Member of Council.

1355/6.1.17 **First Member of Council.** Wes 8/1 one P/1

85/11.1.17 **Second Member of Council.** W 15.1 one 17/1

WD 2012—GPB—1 000—9 2 16

1543

54) Proposals for the revision of the course of studies in the Ayurvedic College & report of the Committee of Rural medical relief.

(6c) It is not desirable to shift the Ayurvedic College from Mysore to Bangalore.

(61) A Medical School will be opened at Bangalore, & such of the successful pupils of the Ayurvedic College as may wish may take a special course of training in Western medicine in that School.

(62) The curriculum of the Ayurvedic College respecting study of the Western System of medicine may also be ~~suitably revised~~ approved.

(63) The entertainment in service of the successful candidates of the Ayurvedic College must continue to be optional with Govt and the Local Boards.

5/7

5/7

(64) A.S.IV for suitably adjusted numbers as the Government may direct

5/7

(65) Draft put up for approval

KP 7.7 Now 66. Please put up a clean typed draft. 10/7

(66) Submitted KP 10/7

1543

G. R. S. 12]

General and Revenue Secretariat. | Med File No. 71 of 1915-16

Serial No.	
	Draft submitted. MK 10/7
105 13.7.17.	Extraordinary member)
	(9) Draft approved by the Extraordinary member. 17.7.17. Tlle MK.
	(10) If approved the draft will issue after perusal by the Dewan.
	Genl Secy) Not necessary. Pamphlet annual Orders 20/7 MK 20/7
11.	To. The Senior Surgeon " Comptroller " Supdt., Nilgiris Deptt. joint Secretary to Govt " Rev Commissioner J. S. Chakravarti Esq P. S. Achyuta Rao Esq
	Order No. 545-50 dy 27.7.17
	Prescribes a new curriculum of Studies for the Ayurvedic college and directs that facilities shall be provided for candidates desirous of ~~being~~ taking a special course of training in western medicine.

NOTE—Contn. sheet.

GPB—75,000—17-12-15

(25

Rec.—Gl. 18]

.....Department.

191

FROM

J. S. CHAKRAVARTI, ESQ., M.A.,
F.R.A.S., etc.,
Comptroller to the Govt. of
H. H. the Maharaja of Mysore.

To

.....ESQ.,

The *Secretary to the Govt. of Mysore,*

.....General.....*Dept.*

Dated

Despatched

Received

No. .....

Subject matter.

Submitting for the information and orders of Government a copy of printed note on the problem of medical relief.

(26)
12 NDD/1878

It is requested that in future communications on the subject, the No. and date of this letter, and the distinguishing letters below the number as given opposite, may be quoted and addressed to the Comptroller, Mysore Government.

the communications

No. 3468/R.-198

OFFICE OF THE COMPTROLLER, MYSORE GOVERNMENT,

Dated Bangalore, the 11th November 1915.

Medical.71-15-5

FROM Rajamantrapravina Diwan Bahadur
J. S. CHAKRAVARTI, ESQ., M.A.,
F.R.A.S., etc.,
Comptroller to the Government of
His Highness the Maharaja of Mysore.

To

D.M.Narasinga Rao, ESQ., B.A., B.L.,

Secretary to the Government of Mysore,

General *Department.*

SIR,

I have the honor to submit herewith for the information and orders of Government a copy of my printed note on the problem of medical relief. The note was discussed both in the Conference of select Heads of Departments and Deputy Commissioners held at Mysore during the last Dasara and in the Representative Assembly of 1915. Both the bodies were in favour of the scheme. Many gentlemen who were unofficially consulted have also expressed their opinion in favour of the scheme and copies of their opinions are annexed hereto for the information of Government. I request therefore that the Government may be pleased to sanction the principle of the scheme and direct that the details of the scheme be worked out. To facilitate the formulation of detailed proposals, I would suggest that a committee consisting of the Senior Surgeon(President), the Revenue Commissioner, a non-official gentleman and myself may be appointed. I request that early orders may kindly be passed.

I have the honor to be,

S i r,

Your most obedient servant,

J. Chakravarti

Comptroller.

L.M.

11/11/15

Enc. to Med. 71-15-5. (2)

Camp Mysore,
17th October 1915.

My dear Sir,

The idea is an excellent one and to this I don't think there will be any opposition even from the medical profession. The medical man at each Hobli Head Quarter will give the first aid in all serious cases and afford relief in all ordinary diseases to which human flesh is subject.

.....
.....

Yours sincerely,
Sd/- M. Chengish Chetty.

---O---

Yelwal Road, Mysore,
16-10-15.

Dear Mr. Chakravarti,

I had a talk with Dr. Armugam and we both agree that your proposed scheme is an excellent one and a most desirable one to carry out for the reasons mentioned in your paper. Given the money, there would be no difficulty whatever in carrying out the scheme. There would probably be some delay in providing the means for and in training themen. A beginning will have to be made if the scheme is to come to fruition and once the thing is started difficulties will disappear. .....
.....

It is not necessary for me to enter into any detail and I shall end by saying ' Go ahead and I wish your excellent scheme complete success.'

And if it should be successful and I don't see why it should not, you will be the means of placing medical aid within the easier reach of multitudes than has been practicable up to this which is a most important thing both from a humane

Enc to Med. 71-15-5

humane and economic pointof view.

I remain,

Yours sincerely,

Sd/- T.J. Mc Gann.

----0----

P.S.- I shall with your permission keep one copy of your paper as the whole thing is to me of very great interest.

--------oOo--------

Shanti Bhavan,

Jail Road, Bangalore,

19th October 1915.

My dear Sir,

I perused with much interest the paper entitled " The Problem of Medical Relief" which you have been kindenough to send me.

The want which you notice is great. The scheme which you propose, if carried into effect, is calculated to redress it to an appreciable extent.

.....

.....

I am,

Yours sincerely,

Sd/- T. Ananda Rao.

Enc. to Med. 71-15=5?

" Yelandur House,"
Mysore, 16th October 1915.

My dear Mr. Chakravarti,

I have carefully read through your paper on " The Problem of Medical Relief" in Mysore.

Undoubtedly at the first sight the idea conveyed in it will appear to medical men trained in western methods " crude and impractical." .....
.....

Your suggestion however has 'grown' on me these two days and I now personally think that with a preliminary general qualification of the completed English V form and a three or four years' theoretical and practical training in the hospitals of the state young men of the kind conceived by you ought to become available as Village" ~~Dress~~ Docters-dressers-nurses."

.....
.....

Yours sincerely,
Sd/- T.S. Achyuta Rao.

****

Mysore, 14-10-15.

My dear Sir,

************************ I am glad to find in your pamphlet sublime efforts at philanthrophy and ~~and~~ a kind of benevolent social service worthy of most enlightened Governments. .....
God bless you for your unpaid and disinterested duties .

Yours sincerely,
Sd/- M. Venkatakrishnayya.

Enc. to Govt. 71-15-5

Note by the Deputy Commissioner, Kolar District, on the Problem of Medical Relief.

****

I have perused Mr. Chakravarti's note on the Problem of Medical Relief with much interest.

There can be no doubt about it that in out of the way rural tracts many persons succumb to disease who might have recovered if they had been able to obtain some medical relief in the first stages of their illness. Also the lives of many infants and their mothers are sacrificed for want of a proper knowledge of how to manage these domestic occurrences.

If, by Mr. Chakravarti's scheme, it becomes possible to provide Docters in out of the way places, he will have conferred one of the greatest boons possible on the people of Mysore.

.....

****

Bangalore, 23rd Octr '15.

My dear Sir,

I have read with great interest the pamphlet you so kindly sent me with your letter of the 13th of this month, and have considered the scheme therein propounded.

....

.....

An experiment on the lines of your suggestion would be very interesting.

Yours sincerely,

Sd/- Leslie Miller.

Enclosed. 11-15-5

The Palace, Mysore,
28th October 1915.

My dear Mr. Chakravarti,

I have gone through your exceedingly interesting note on the subject of Medical ~~Relief~~ aid in the rural parts of the State.

The scheme is certainly worth trying and I do not see any reason why it should not prove a success. ********** **********

In conclusion, I should like to congratulate you on formulating what I consider to be an eminently practicable and useful scheme which if successful- and I do not see any reason why it should not be- would confer a real boon on the village population of the State and I wish you every success in your endeavours to carry it through.

Yours sincerely,

Sd/- Mirza M. Ismail.

Extracts

Madras Chief Superintendent
Comptroller's Office

11th November 1915.

Medical 71-15-6

A brief note on a scheme to extend Medical aid to interior parts of the State and incidentally to open out a career for the successful students of the Ayurvedic College.

Past history of the College.

The College was the outcome of the vaidya classes held in the Maharaja's Sanskrit College, Mysore and it was placed on its present footing in 1909 with the main object of turning out a better set of practitioners who will combine theoretical acquirements with practical training and also possess some working knowledge of Anatomy and Physiology and European system of medicine. The syllabus was accordingly revised and the present curriculum besides imparting a sound knowledge of Ayurvedic system aims at giving a fair amount of instruction in Anatomy and Physiology, Materia Medica and Medicine, Midwifery and Hygiene, Ambulance and elementary Chemistry and also elementary Surgery (without operations.) Hospital attendance throughout the course is insisted upon to learn practical work and facilities are afforded at the local General Hospital for the students to watch diagnosis and dispensing as also post mortem dissection. The course extends over a period of 4 years and if

the opportunities are only rightly utilized, it is bound to result in turning out a class of practitioners who will be much in advance of the ordinary Ayurvedic Practitioners in point of learning and reliability.

2. Though it is now a little over 6 years since the new curriculum was brought into force, only two batches of students have been sent out of the College. Out of these eleven students were declared to have passed the theoretical and practical tests and have received the College Diploma of "Ayurveda Vidwan". The three best students of the first batch are now undergoing a further course of practical training under some of the experienced "Kavirajas" at Calcutta with a Government scholarship of Rs.25/- a month. The next batch of students will be ready for the final examination in June next.

3. The time has now arrived to consider how best the services of these students may be utilized in the interests of the public. This is also necessary if the College should continue to attract a satisfactory type of entrants. At present there is only a very limited field open for employment except private practice which seldom affords a living wage to the practitioners newly starting.

4. On the other hand the need for Medical aid in the interior parts of the State

Copy put in (C)

is very great. The excellent memorandum on the problem of Medical relief by Dewan Bahadur Mr. J. S. Chakravarti deals exhaustively with the subject. The present suggestion brings up for consideration only a slightly different solution of the problem, and aims at the utilization of the Ayurvedic institution for training a cheaper class of medical men capable of handling the more ordinary ailments.

5. In recommending the introduction of the new curriculum into the College Col. J. Smyth, the then Senior Surgeon considered that Medical aid should never be more than seven miles from any sick person and was of opinion that it would be useful to create a class of Medical practitioners who may be expected to practise medicine with a reasonable amount of safety and who being comparatively cheaper may be utilized to serve the needs of the outlying places under Government cognizance.

6. Taking the distance limit of seven miles as the basis, a list of places has been prepared where Vaidyasalas may be opened omitting from consideration all areas now served by a Dispensary or Vaidyasala. The list. shows that such institutions may be started at 120 new places distributed

Statement I

(35)

according to Districts as follows:--

(1) Mysore District.	-	17
(2) Hassan "	-	8
(3) Kadur "	-	11
(4) Shimoga "	-	13
(5) Chitaldrug "	-	22
(6) Tumkur. "	-	22
(7) Kolar. "	-	15
(8) Bangalore "	-	12
		120

7. In Government Order No.1-3/M.F. 304-10-2 dated 1st July 1912, the pay of these new class of practitioners when appointed to existing Vaidyasalas was fixed at Rs.15/- rising to Rs.30/-. In consideration of the superior qualifications and the long course of training, the starting pay may well be fixed at Rs.20/- and the Practitioners divided into 3 classes with pay at Rs.20, 25 and 30/. In addition they may be given a dispensary cooly on Rs.5/- and a contract contingent grant of Rs.10/- or Rs.15/- for drug expenses according to the importance of the station. Worked on this basis the annual additional cost under pay will be Rs.36,000/- and under wages and contingencies Rs.25,200/- This maximum will be attained in a period of about 10 years as the new Vaidyasalas are to be opened as suitable men become available. As in the case of Sub

(36

Assistant Surgeons, the cost under pay may be met from the State Funds and the cost under wages and contingencies may be met from the District Funds or Village Improvement Funds.

8. In addition to the above an additional allotment of Rs.3000/- a year may be necessary to improve the pay and prospects of the Pandits of the College and to increase the number of scholarships in the College to ensure about 12 to 15 successful students annually, so as to supply the requisite number of recruits to replace wastage and to man new Vaidyasalas.

9. In the above calculation, I have omitted to take into consideration the existing 34 Vaidyasalas which are manned by men of varying qualifications and whose pay or allowance now met by the District Boards is fixed on no uniform basis ranging as it does from Rs.6/- to Rs.41/-. Some of these institutions are located at places where European Dispensaries exist at present and their retention in their present situation may have to be examined afresh. It is a matter for satisfaction however, that these practitioners are, with some solitary exceptions, reported by the Deputy Commissioners to be popular and useful.

Statement II

10. Seeing that the Vaidyasalas cost in all only about a third to a fifth of an European Dispensary, it appears to be advantageous to increase the scope of usefulness of these institutions to serve outlying places which enjoy at present little or no medical aid from the State. I may in this connection be allowed to quote the remarks of Col. Smyth contained in a letter to me under date 20th September 1915.

lay 8

"I do hope the idea will not be allowed to be forgotten. I took a great deal of trouble over it - not without opposition from my own side for having anything to do with the Ayurveda. But I think it is more common sense to combine the institutions in such a free state as Mysore where persuasion and not brute force is in favour."

26.10.15

Chairman Mysore Dept.

Statement I

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Statement showing the names of villages where Ayurvedic Dispensaries may be opened.

No.	Taluk.		Names of villages.
	MYSORE DISTRICT.		
1.	Gundalpet.	- -	Bandipura.
2.	"	- -	Madduru.
3.	"	- -	Beguru.
4.	Chamarajanagara.	-	Attakulapura or
5.	"	- -	Punguru.
6.	"	- -	Bendaravadi.
7.	Heggadadeganakote.	-	Muturu or
8.	"	- -	Saragur.
9.	"	- -	Semanahalli.
10.	"	-	Hullahalli.
11.	Hunsur.	- -	Bilakere.
12.	"	- -	Bettadapura.
13.	T.Narasipur.	- -	Talkad.
14.	Malavalli.	- -	Halaguru.
15.	Mandya.	- -	Basaralu.
16.	"	- -	Koppa.
17.	Nagamangala.	- -	Nelligere.
	HASSAN DISTRICT.		
18.	Channarayapatna	-	Dindiganahalli.
19.	"	-	Hireesave.
20.	"	-	Nuggehalli.
21.	Sakaleshpur.	-	Iguru.
22.	"	-	Palya.
23.	Hassan.	-	Gendasi.
24.	Belur.	-	Halebeedu or
25.	"	-	Javagalu.

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KADUR DISTRICT.

26.	Moodagere.	+	Kottigehalu. or
27.	"	-	Balur.
28.	"	-	Ugihalli.
29.	"	-	Aladur.
30.	Sringeri.	-	Hosakere.
31.	Chickmagalur.	-	Hulikere or
32.	"	-	Sakarayapatna.
33.	Kadur.	-	Bilagur.
34.	"	-	Santeveri or
35.	"	-	Lingadahally.
36.	Tareekere.	-	Lakkavalli.

SHIMOGA DISTRICT.

37.	Tirthahalli.	-	Agumbi.
38.	"	-	Hunchadakatte.
39.	Nagara.	-	Pottaguppe.
40.	Shimoga.	-	Umbale Bailu.
41.	"	-	Holehonnur.
42.	Channagiri.	-	Basavapatna.
43.	Sagara.	-	Belandur.
44.	"	-	Karuru.
45.	"	-	Talaguppa.
46.	Shikaripur.	-	Hosur.
47.	"	-	Shiralakoppa.
48.	Soraba.	-	Chandragutti.
49.	"	-	Tattur.
50.			

CHITALDRUG DISTRICT.

50.	Hosadurga.	-	Budihalu.
51.	"	-	Bidarukere.

52.	Holalukere.	-	Madapura.
53.	"	-	Sasalu.
54.	Chitaldrug.	-	Balenahalli.
55.	"	-	Baramasagara.
56.	"	-	Baramapura or
57.	"	-	Ajjanagala.
58.	"	-	Turuvenuru or
59.	"	-	Nayakanahatti.
60.	Davanagere.	-	Lankikere or
61.	"	-	Anegod.
62.	Jagalur.	-	Suka.
63.	"	-	Mudapura.
64.	Challakere.	-	Talakere
65.	"	-	Parashuramanapura.
66.	Hiriyur.	-	Yaraballi.
67.	"	-	Yelladakere.
68.	"	-	Dharmapura.
69.	"	-	Javagondanahalli.
70.	Molakalmur.	-	Bommagondanakere.
71.	"	-	Rampura.

TUMKUR DISTRICT.

72.	Kunigal.	-	Amrutur.
73.	" Kallur.	-	Kallur.
74.	" Hebbur.	-	Hebbur.
75.	Turuvekere.	-	Mayasandra.
76.	Tiptur.	-	Honnavalli.
77.	"	-	Kibbanahalli.
78.	Chikkanayakanahalli.		Hagalavadi.
79.	Sira.	-	Tavarekere.
80.	"	-	Kallamballi.
81.	"	-	Nadur.

(4.

82.	Sira.	-	Badavanahalli.
83.	Maddagiri.	-	Midagesi.
84.	"	-	Channarayadurga.
85.	Pavugada.	-	Doddahalli.
86.	"	-	Nidugal.
87.	"	-	Hosakote.
88.	"	-	Tirugani.
89.	"	-	Gummaghatta.
90.	~~Chenikk~~.Tumkur.	-	Cheetur.
91.	"	-	Kotala or
92.	"	-	Nelahalu.
93.	Gubbi.	-	Kadaba.

KOLAR DISTRICT.

94.	Malur.	-	Masti.
95.	"	-	Narasapura.
96.	Bowringpet.	-	Ramasandra.
97.	Kolar.	-	Huttur.
98.	Mulabagal.	-	Bhirakur.
99.	Sreenivasapur.	-	Agara.
100.	"	-	Nelavanki or
101.	"	-	Addagallu.
102.	Chintamani.	-	Mottamakanahalli.
103.	"	-	Sadali.
104.	Sidlaghatta.	-	Basattihalli.
105.	Chikkaballapur.	-	Manchenahalli.
106.	Goribidanur.	-	Hosahalli.
107.	Gudibande.	-	Periyasandra.
108.	Bagepalli.	-	Patapalya.

BANGALORE DISTRICT.

109.	Kanakanahalli.	-	Kodihalli.

110.	Kanakanahalli.	-	Satanur.
111.	"	-	Harohalli.
112.	Channapatna.	-	Ramagiri.
113.	Closepet.	-	Bidadi.
114.	Magadi.	-	Tavarekere.
115.	"	-	Solur.
116.	Nelamangala.	-	Gudimaranahalli.
117.	Doddaballapur.	-	Nakalidurga.
118.	Devanahalli.	-	Hindiganalu.
119.	Bangalore.	-	Sarjapura.
120.	Anekallu.	-	Bannerughatta.

Muzrai Superintendent.

Statement II

Statement showing the names of places where Vaidyashalas are now situated.

No.	Taluk.	Station.
1.	MYSORE DISTRICT.	
1.	Mysore.	Indigenous Hospital, Mysore.
2.	Seringapatam.	Seringapatam.
3.	T.Narasipur.	Talkad.
4.	Krishnarajpet.	Sindhaghatta.
5.	Chamarajanagar.	Tagadur.
6.	Nanjangud.	Kalale.
7.	Mandya.	Maddur.
8.	Krishnarajpet.	Kikkeri.
	HASSAN DISTRICT.	
9.	Channarayapatna.	Shravanabelgola.
10.	Hassan.	Grama.
	KADUR DISTRICT.	
11.	Chickmagalur.	Chickmagalur.
12.	Tarikere.	Tarikere.
13.	Kadur	Birur.
	KOLAR DISTRICT	
14.	Srinivasapur.	Manchinilkote.
	TUMKUR DISTRICT.	
15.	Maddagiri.	Kodagenahalli.
16.	Gubbi.	Kadaba.
17.	Maddagiri.	Hosakere.

18.	Kunigal.	Amritur.
19.	Pavagada.	Hosakote.

CHITALDRUG DISTRICTS.

20.	Chitaldrug.	Chitaldrug.
21.	"	Bharmasagar.
22.	Challakere.	Naikanhatti.
23.	Jagalur.	Jagalur.
24.	Davangere.	Mayakonda.

SHIMOGA DISTRICT.

25.	Shimoga.	Shimoga town.
26.	"	Holehonnur.
27.	Sorab.	Chendragutti.
28.	Chennagiri.	Basavapatna.
29.	Sagar.	Kallur.

BANGALORE DISTRICT.

30.	Closepet.	Kutagal.
31.	Devanahalli.	Vadigenhalli.
32.	Magadi.	Kudoor.
33.	Kankanhalli.	Kodihalli.

Muzrai Superintendent.

Proceedings of the Government of His Highness the Maharaja of Mysore.

Read:-

Letter No 3468 / R 198 dated the 11th November 1915 from the Comptroller, submitting for information a copy of his printed note on the problem of medical relief and requesting that the principle of the scheme outlined therein may be sanctioned so that the details may, with the approval of Government, be worked out by a Committee consisting of the following members:-

Senior Surgeon (President).

Revenue Commissioner.

Comptroller.

A non-official gentleman.

Note by the Surgeon on the extension of medical aid in the State.

Order No:- 5926-30 med 71-15-7.

Dated Bangelore the 12th January 16

Comptroller's

The Note raises general questions of far reaching importance: but the formulation of details is necessary for correctly judging the practicability of the scheme under existing conditions.

2. Accordingly, a Committee consisting

consisting of the Senior Surgeon - as President and the Revenue Commissioner, the Comptroller and Mr. and Mr Narayanaswamy Iyengar P. S. Achyuta Rao as members is -- appointed to thoroughly examine the scheme, elaborate necessary details and submit their definite -- recommendations to Government on -- or before 30th June 1916.

3. The following matters may, -- among others, be duly investigated by the Committee.

(i) Whether the Scheme submitted by the Comptr can be amalgamated with the proposals of the Insp Genl Hospitals, and what alterations are required in either of the Schemes;

(ii) Whether the proposed period of training for two years is sufficient.

(iii) Whether the general educational qualifications proposed - for the candidates are adequate.

(iv) Where the students can best be trained.

(v) What the cost of such training is likely to be.

(vi) Whether it is desirable - to persuade native pandits and --- other medical practioners in rural parts to undergo the training referred to in the scheme?

(vii) What should be the relationship between these Hobli doctors and the Taluk Sub-Assistant --

Surgeons

Surgeons and the District Surgeons.

~~(all the Scheme proposed by Mr Bowring Superr~~

Secretary to Government,
General Department.

To

The Comptroller in Mysore.

The Senior Surgeon in Mysore.

The Revenue Commissioner in --
Mysore.

Mr. P.S. Achyuta Rao.

From

The Senior Surgeon,

Mysore Govt., Bangalore.

To

The Secretary

to the Govt. of Mysore,

General Deptt.,

Bangalore.

Dated May - 5 1916

No. G. 500

Encls.

Subject.

Forwarding report of the Committee on rural medical relief.

No. 3984

(49

No. G. 500
Encls

Office of Senior Surgeon, Mysore Govt.

Dated, Bangalore, May - 5 1916 191

Medical 71-15-8

From Rajakarya Pravina
Rao Bahadur T. V. Arumugum Mudaliar, Esq., M. B., C. M.,
Senior Surgeon with the Government of
H. H. the Maharaja of Mysore, Bangalore.

To

The Secretary to the Government of
H. H. the Maharaja of Mysore,
General Deptt., Bangalore.

Sir,

I have the honor to forward the enclosed report of the Committee appointed by Government in their Order No. 5976-30 Med. dated 12th February 1916, to consider the question of "Rural Medical Relief." The draft and fair copy of the report were forwarded to the members for their perusal and signature. The Comptroller, the Revenue Commissioner and the Muzrai Superintendent have signed it in token of their unqualified approval, while Dr. Achyuta Rao has sent a memorandum containing his suggestions. The memorandum is enclosed in original. I have also signed the report as embodying the results of the discussion that took place at the 2nd meeting of the Committee. My individual views on the subject are as follows,-

2. There can be no doubt that the need for medical aid is great in parts of the malnad and in certain specially unhealthy and out-of-the-way places in the State. But these places cannot be more than about 40 or 50, the major portion of the State being now provided with well equipped dispensaries, which are generally not more than 10 to 15 miles apart. It will, therefore, be sufficient, for the present at all events, to have about

40 fully qualified Sub Assistant Surgeons, one for each of the specially unhealthy hoblies to be selected, instead of twice the number of half trained practitioners.

3. The total cost of training Sub Assistant Surgeons for 4 years is about Rs 825 per head or will come to Rs 33,000 for 40 students for 4 years or Rs 8250 per annum, against Rs 15,600 per annum, the estimated cost of the scheme suggested in the Committee's report, which seems to me to be out of all proportion to the utility of the "practitioners" to be turned out.

4. The standard of general educational qualification (English Lower Secondary) fixed by the Committee is too low to expect the candidates to understand the lecture on the various professional subjects in English and for teaching in Kannada, the want of suitable standard text books is a difficulty that is not easy to solve. I am, therefore, of the opinion that our ~~personal~~ present requirements will be sufficiently met by getting about 40 fully qualified Sub Assistant Surgeons trained in any of the Medical Schools in the Madras Presidency or at Poona for 4 years. It may not be difficult to secure even female medical subordinates by the offer of liberal scholarships to female candidates.

5. Should Government be pleased to establish a medical school in the State in future it ought to be of a type that will impart instruction in professional knowledge the standard of which will in no way be inferior to that of the training given in the British Indian Government Medical Schools. It will then be easy to arrange that these Sub Assistant Surgeons should undergo an additional course of six months or a year in Unani or Ayurvedic system of medicine in the local Ayurvedic institution which may, in the meantime, be re-organised and improved.

I have the honor to be,
Sir,
Your most obedient servant,

Senior Surgeon.

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Bangalore,

1916.

To

The Secretary to Government,

General Department.

Sir,

With reference to Government Order No.5926-30 Mod: dated 12th February 1916, constituting us into a Committee for considering the general questions raised in Mr. Chakravarti's note on "The Problem of Medical Relief" we beg to submit as desired this report which embodies our recommendations arrived at after a thorough examination of the scheme.

2. The Committee met in the Office of the Senior Surgeon for the first time on Monday the 13th March 1916. At this meeting the Senior Surgeon presided and Messrs. Chakravarti and Aravamuda Iyengar were present . A draft report embodying the conclusions arrived at at this meeting was then circulated to all the members. A second meeting was held on Thursday the 23rd March 1916 at which all the members except Mr. K. Doraisamy Iyer who was not in the Station were present and this report was adopted in its final form. Mr. Doraisamy Iyer wrote before the date of the second meeting to say that he agreed with all the recommendations in the draft report.

3. In the first place we record our pleasure and gratification at the fact that the Government of India have accepted a resolution moved in the Imperial Legislative Council on the 9th March 1916, embodying a scheme identical with the one which is under our

consideration. The mover of the resolution expressly referred to the Mysore Scheme towards the end of his speech. In the opinion of the Committee this is a very convincing proof of the soundness and desirability of the Scheme. (vide extract from the Madras Mail dated 10th March 1915 Appendix, A).

4. We are of opinion that practical action on the lines indicated in Mr. Chakravarti's note should be commenced at once by starting an institution on the lines (1) elaborated in Appendix, B of this report. The existing Ayurvedic College should work in coordination with this (2) institution and should therefore be transferred to Bangalore. The two institutions will be known as "The training institution for rural medical practitioners" and the "Ayurvedic Vidyalaya" respectively. They will work under the management of the same Superintendent and Office for business purposes but the professional staff will be quite separate . The students of the Training Institution will however be taught the use of indigenous drugs and herbs by the Vidyalaya staff, while the rudiments of the European medical and sanitary sciences and curative and nursing processes will be taught by the Training Institution staff to the Vidyalaya students.

5. If the proposal to start a training institution be approved by Government it may be managed by this Committee until further orders of Government. The reorganized Ayurveda Vidyalaya in Bangalore may also be under the same management.

6. If early orders are passed on this report it may

be

be possible to start work on the lines indicated with effect from 1st June 1916. In that case applications from intending candidates for admission should be called for as early as practicable.

7. In the notification calling for applicants it should be distinctly mentioned that if after the two years training is satisfactorily completed the students want to take service they will be provided with appointments on Rs.20-1-30 ~~(annual)~~ per mensem (with the possibility of additional emoluments from private practice) under Government, local bodies or other employers. We think that there will be ample scope for the employment of many hundreds of such trained men in various parts of the state and that there will be no difficulty in usefully employing them. Even if Local Bodies and Village Communities are not able to employ them in sufficient numbers at the beginning, as rural practitioners, it will be a great advantage to employ them all in all vacancies in the class of Compounders, dressers, vaccinators etc., at slightly increased cost. We think that a definite promise of employment to successful candidates is necessary in the beginning for drawing a suitable class of candidates to the institution.

8. After the institution is started, the Committee will place itself in communication with various local bodies and other employers and make arrangements to secure employment for the students as they come out.

9. The Ayurvedic College at Mysore is now costing a sum of Rs.7,200/- per annum but the results achieved are not commensurate with this expenditure. The proposed

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co-ordination of the Ayurvedic College with the training institution for rural practitioners will result in economy and will also materially improve the usefulness of the Ayurved Vidwans. The scheme provides for training rural medical practitioners for two years. In this training a knowledge of indigenous drugs and herbs and their application for curative purposes will form an important part. After this two years' training is over a few students who desire to qualify as Ayurved Vidwans will be given a further two years' course on the Theory and Practice of Ayurveda in the Ayurveda Vidyalaya. This Vidyalaya will therefore produce a class of safe men who besides possessing all the qualifications of rural medical practitioners will be able to practice Ayurveda in its higher aspects just as the Sub-Assistant Surgeons and Assistant Surgeons do with reference to the European system. To improve the knowledge of the existing practising Pandits provision is also made for imparting Ayurvedic instruction in the Vidyalaya to men who have not passed through the two years' course in the Training Institution. But they will attend only as casual students and will not be entitled to scholarships or diplomas and the arrangement will be discontinued as soon as a sufficient number of trained men offe for Ayurvedic study

10. The foregoing paragraphs sufficiently answer the points specifically referred to us in para 3 of the Government Order of 12th February 1916. But for clearness the answers are given below in a categorical form:

(i) Whether the scheme submitted by the Comptroller can be amalgamated with the proposals of the Muzrai Superintendent, and what alterations are required in either of the schemes:

(i) Answer.- Yes; the two schemes have been coordinated and both the Comptroller and Muzrai Superintendent are satisfied that the scheme now put forward will secure the best results of both the schemes.

(ii) Whether the proposed period of training for two years is sufficient. -- Yes; but those who want to get high class Ayurvedic Training must undergo a further course of 2 years in the Ayurvedic Vidyalaya.

(iii) Whether the general educational qualifications proposed for the candidates are adequate. -- Yes; General education up to the English Lower Secondary Standard is sufficient. Classes in English and General subjects will be held for female students in whose case a lower standard of general education will be considered sufficient for admission.

(iv) Where the students can be best trained. -- In the proposed institutions vide Appendices B & C. to the report.

(v) What the cost of such training is likely to be. Vide Estimates in Appendices B & C.

(vi) Whether it is desirable to persuade native pandits and other medical practitioners in rural parts to undergo the training referred to in the scheme. Very desirable if they possess the required standard of General education and special facilities have been provided for them e.g. in age limit for admission, special Ayurvedic Class etc.,

(vii) What should be the relation between these Hobli Doctors and the Taluk Sub-Assistant Surgeons and the District Surgeons.-- These rural practitioners

will

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will be under the District Surgeon as regards professional matters but for disciplinery purposes they will be under the authority employing and paying them.

11. We solicit that early and favourable orders of Government may be passed on these proposals so that applications from students may be called for in April and the training Institution opened for work from 1st June 1916. We think that the extra cost involved in the scheme namely Rs.13,788/- is very moderate especially when we take into account the fact that it will considerably enhance the utility of the present expenditure on the Ayurvedic College. We recommend that the necessary budget provision as indicated at the end of Appendix B. may be made in the estimate for 1916-1917.

We have the honour to be

Sir,

Your most obedient Servants,

Chairman.

J. S. Chakravarti

Members.

Memorandum bearing my suggestions is hereto attached

T. V. Ayyar

Appendix- A.

Extract from the Madras Mail dated 10th March 1916.

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The Hon'ble Dr. M.N. Banerjee moved his resolution which was as follows:-

That this Council recommends to the Governor-General in Council that Local Governments be asked to consider the advisability of establishing institutions for the purposes of giving medical students a special course of training conducted in the vernaculars so as to qualify them for ordinary medical practice in rural areas and of encouraging and assisting deserving private enterprise to provide such medical education.

He said that the question of supplying sufficient men trained in western methods of treatment had been engaging the attention of Government even from as far back as 1839 when Hindustani classes were opened in connection with the Calcutta Medical College for the purposes of Military Services. And now there were vernacular medical schools for hospital assistants all over India intended for providing a lower preliminary education with a shorter course and lower standard of examination than was arrived at in Medical Colleges. But the object was being ignored very largely and the students of these classes were subjected to the whole course of medicine and to attaining knowledge which would be of no use to them in their after-life. As the Committee appointed in 1878 by the Bombay Government said, there seemed to be some confusion of ideas between the standard aimed at and that actually realised. The former was complete medical education and the latter was probably the lowest standard achieved by any medical school; and that evil has been lately aggravated by the Local Medical Registration Act rules since framed of having lectures and Examinations in English had already affected private institutions. The remedy lay, he said, in going back if possible to the old standard, or if that was not possible in starting new institutions with the humble aim of training humble village practitioners. Their aim should be to give a thorough training which would make them efficient practitioners capable of dealing, not indeed with complicated disease, but such as prevail in the country requiring quiet treatment. One of the main conditions of success of the scheme was that they should be recoganised as qualified practitioners. He then referred in conclusion to the scheme proposed by the Mysore Government.

Appendix:- B.

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The Training Institution for Rural Medical Practitioners.

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(1) A training institution for male and female students should be started from 1st June 1916.

(2) In this institution a course of two years' training will be imparted to qualify students as rural medical practitioners.

(3) For male students education up to the English Lower Secondary Standard is to be required for admission; for girls a lower standard may for the present be accepted. The ordinary maximum age limit for admission will be 20 years except in the case of actual practitioners(including Compounders) in whose case the limit will be 30 years.

(4) A building should be rented near the Victoria Hospital for locating the training institution.

(5) The staff and students of the school should attend the Victoria hospital and take part in the work there under the guidance of the Hospital authorities and under rules to be framed by the Senior Surgeon.

(6) Allowances will be given to the staff of the Victoria Hospital for extra work imposed on them under (5)

(7) The staff and students of the school should also be allowed access to other hospitals and dispensaries in Bangalore for purposes of training under rules to be framed by the Senior Surgeon.

(8) There should be three hours teaching work and at least four hours practical work each day.

(9) In the first year the teachers' work with the students will be light (there being only one class) but they will have to organize their respective departments.

(10) All teachers should be entertained from the beginning and commence work in their respective groups of subjects. The course of training being only two years no subjects should be reserved for the second year.

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(11) The staff should be as follows:-

(a) One Superintendent. He should also be teacher in Anatomy, First-aid, Dressing, Minor Surgery and care of infants.

N.B. The female students will have an additional practical course in midwifery and care of infants.

(b) One teacher and Demonstrator in Physiology, Materia Medica including compounding, Medicine etc.,

(c) One teacher and Demonstrator in Hygiene, sanitation, care of the sick, vaccination, plague inoculation etc.,

(d) Clerical and menial.

(12) The Superintendent should be an Assistant Surgeon and the teachers and demonstrators Sub-Assistant Surgeons.

(13) Approximate Cost:-

Initial equipment:- Rs.5000/-

Recurring:-

Rent Rs. 100 per month.

Stipends:-

50 male students at Rs.5 to 10 each.	400	do.
20 Female students at Rs.10/- each.	200	do.

Staff:- General:-

1 Superintendent.	200	do.
1 Teacher & Demonstrator.	100	do.
1 do. do.	75	do.
1 Clerk.	30	do.
4 Menials.	32	do.
Allowances to Victoria Hospital staff.	100	do.
Supplies & Services & Contingencies.	63	do.
	Rs.1300	Rs.15,600 a

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(14) Deducting the saving effected by the reorganization of the Ayurvedic College (Vide Appendix.C.) viz., Rs.1822/- per annum the extra cost of the scheme comes ~~to about~~ to Rs.13,778/- per annum.

(15) A sum of Rs.15,600 may be provided in the budget for 1916-17 under a special head "Training Institution for Rural Medical Practitioners" under medical, the provision for Ayurvedic College for Muzrai being reduced to Rs.5658, as per scale in Appendix .C. A lump sum grant of Rs.3000/- may also be made under the latter head for the garden for indigenous medicinal plants.

Appendix C.

AYURVEDA VIDYALAYA.

Working in co-ordination with the Training Institution for Rural Medical Practitioners, there will be an institution to impart instruction in Ayurveda.

2. This institution will be known as Ayurveda Vidyalaya and will be conducted under the control of the ~~Assistant Surgeon~~ Superintendent in charge of the training institution.

3. The Vidyalaya will absorb the Ayurvedic College at Mysore and will take over the students now studying at the place.

4. The course of training in Vidyalaya will extend over two years and shall consist of both theoretical and practical work.

5. The students seeking admission in the institution will ordinarily have successfully gone through the full course of training for rural practitioners and these after passing the final examination in Ayurveda will receive the Vidyalaya diploma as "Ayurveda Vidwan." Provision will also be made for the instruction in Ayurveda of students without the preliminary qualification of training as rural practitioners, but these students will not be entitled to the studentships attached to the institution or to the Vidyalaya diploma of "Ayurveda Vidwans."

6. The staff of the Vidyalaya will consist of

(a) One teacher and demonstrator on the theory and practice of Ayurveda;

(b) One junior teacher of Ayurveda and demonstrator in indigenous drugs and herbs;

(c) One Demonstrator who will be responsible for the preparation of Ayurveda medicines and also be in charge of the herb garden;

(d) Menials

7. In connection with the Vidyalaya an Ayurvedic hospital and dispensary will be opened which will be in the charge of the Senior teacher in Ayurveda. At first work will be confined to treatment of out-door patients and later on as work develops provision will also be made for in-patient wards. In this institution the Vidyalaya students will be given a practical training in the diagnosis and treatment of diseases.

8. The Junior teacher of the Vidyalaya will in addition to his duties also take up the subject of indigenous drugs and herbs and their application for curative purposes in the training institution for rural practitioners. For this purpose a well equipped museum of Ayurveda drugs and medicines will be maintained.

9. Suitable accommodation for the Vidyalaya and Hospital will be made available at the training institution or rented for the purpose and a herb garden should also be laid out and maintained in the neighbourhood.

10. Ordinarily there shall be three hours of teaching work and four hours of practical work including the compounding and preparation of Ayurvedic medicines.

11. The staff of the College should be entertained immediately as the Vidyalaya will take over the work of the Mysore Ayurvedic College and provision has to be made for the instruction of students already in the College.

12. The approximate cost of the institution is estimated at an initial expenditure of Rs.3,000/- for a herb garden and a recurring cost of Rs.471-8-0 per month or Rs.5658/- per annum which will be a saving of Rs. ~~1,692~~ 1,972./- on the present cost. The details are shown below. No separate provision has been made for rent or clerical assistance on the expectation that the provision under these heads for the Training Institution will be sufficient for ~~the~~ this/institution also

APPROXIMATE COST.

13. Initial equipment and laying out of a herb garden. - - - -		Rs. 3000	0 0
Staff.			
Senior Teacher. - -	100-5-125	118	12 0
Junior " - -	35-3-50	46	4 0
Demonstrator. - -	25-2-35	32	8 0
2 Gardeners. - -	8 each)		
1 Cooly. (for preparation of medicine)	8 ")	32	0 0
1 Peon. - -	8)		
Cost of drugs. - - - -		30	0 0
Contingencies. - - - -		20	0 0
Stipends.			
16 Scholars at Rs.12/- - - -		192	0 0 per month
T o t a l.		471	8 0 per month
		Rs. 5658	0 0 per annum.

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14. Against this the present cost of the Ayurvedic College is as follows:--

Grade pay of Head Pandit deducting Municipal contribution of Rs.600/-.	Rs.1800/-
Allowance to Head Pandit as Head Master.	480/-
Pandits and Lecturers. - -	1020/-
Establishment. - - - -	672/-
Scholarships, 5 for each class. -	2520/-
Supplies and services. - -	588/-
Contingencies. - - - -	400/-
	Rs.7480/-

15. In the scheme of rural medical relief, there will be ample scope for the useful employment of this class of medical practitioners who can be trusted to practice the Ayurveda system on safer and more scientific lines. Public employment can be found for them in the Ayurveda dispensaries now existing or likely to come into existance at the instance of local bodies or private munificance and when so employed their salary will be fixed at Rs.30-1 (Annual)-40.

16. In the case of Ayurveda Vidwans who have already passed out of the Mysore ~~Medical~~ Ayurvedic College according to the reformed course of instruction, a provision will be made at the training institution to give them a 1 year's special course of practical training in the Western system of medicine to fit them either for the practice of Ayurveda system or for their employment under the scheme of rural medical practitioners and during the period of this training a stipend of Rs.10/- a month will be allowed.

Memorandum of Suggestions

1. It is not made clear in the scheme that the Language to be used in imparting instruction in the proposed Training Institution for Rural Medical Practitioners" is Kanarese. It should be clearly stated that the teaching is to be in the Vernacular and not in the English Language.

2. The city of Mysore rather than Bangalore is in my opinion better suited for the location of the Ayurvedic College. The "Training Institution" which in a sense is to be the feeder for the Ayurvedic College should necessarily therefore be also located in Mysore. Mysore has the claim to such teachings of having supremacy. Learned pandits of the art of indigenous medicines had their being & flourished here under the Royal patronage of the Mysore Royal House. Even now indigenous system of medicine is honored more in Mysore than in Bangalore. Embryo Ayurvedic Vaidyans would find it easier to attend the "Training Institution for Rural medical practitioners" for their preliminary Course of training. Teachers of Ayurvedic System are available in the Sanskrit College Mysore & from among Palace Pandits.

3. Trained Rural medical practitioners should find their occupation in the hobbis & hobbis only - when they do not receive Appointments as Rural Medical Practitioners they should never be adopted as Compounders in the Local fund & Municipal Dispensaries as contemplated in the Scheme nor should they be employed as Vaccinators Compounders & Vaccinators already employed & have put in 2 or 3 years of service will get disheartened when they find that a recently trained

Rural medical practitioner appointed to do the work of a Compounder or vaccinator starts with a salary which neither a Compounder nor vaccinator can hope to get on the last day of his retirement from service & it is not right to expect efficient and honest work from disheartened & reasonably dissatisfied servants.

4. Rural medical practitioners are meant to be employed by local bodies such as "Village Unions" "Taluq Boards" & "District Board". It is essential to consult such local bodies in regard to their ability & willingness or otherwise to bear the full burden of the expenditure to be incurred by them before we actually start the Institution. There is not enough time between now & the 1st of June 1916 for the purpose. It is also necessary to ascertain before starting the Institution what class books in Kanarese are available for teaching Anatomy - Physiology - Materia Medica - Medicine & & such of them as are not available should be made available - I am of opinion that teaching such Scientific subjects in Kanarese should not be entrusted to persons whose mother tongue is not Kanarese - All these preliminary essentials should be got well in hand before starting the School.

5. I for one & on the above noted reasons do not see the urgent hurry to start the School on the 1st of June 1916 - We may well take a year or two to deliberate patiently & calmly on the details involved in the scheme and take definite action in the way of starting the Institution -

C. V. Venkataramaiah

10th April 1916

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G.R.S. 31] W. D. 1270—GPB—1,000—7-12-15—Stg.

GOVERNMENT OF HIS HIGHNESS THE MAHARAJA OF MYSORE
GENERAL AND REVENUE SECRETARIAT.

No. 1599 *Dated Bangalore, 26/8/16 August* 1916

Med 71-15-9

FROM

D. M. NARASINGA RAO, ESQ., B.A., B.L.,
Secretary to the Government of His Highness the Maharaja of Mysore,
General Department.

To

Rajakaryapravina Rao Bahadur
T. V. Arumugam Mudaliar, Esq., M.B.,C.M.,
Senior Surgeon with the Government of
His Highness the Maharaja of Mysore.

SIR,

With reference to your letter No.G.500 dated the 5th May 1916 forwarding the report of the Committee appointed to consider the question of "rural Medical relief", I am directed to request that, as the curriculum of studies in the Ayurvedic College, Mysore, provides for some training in the Western system of medicine, the opinion of the said Committee ~~if~~ as to the present curriculum may not be suitably revised so as to better fit the men trained in the Ayurvedic College for employment as rural medical practitioners may be obtained and submitted to Govt.

I have the honour to be,
Sir,
Your most obedient servant,

Secretary to Government,
General Department.

R.N.

26/8/16

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From

The Senior Surgeon,

Mysore Govt., Bangalore.

To NOV 916

The Secretary

to the Govt. of Mysore,

General Deptt.,

Bangalore.

Dated 14 Nov. 15 1916

No. G. 149

Encls.

Subject.

Submits the opinion of the Rural Medical Relief Committee on the question of revision of the course of studies in the Ayurvédic College to train students better fitted as Rural Medical Practitioners.

69.

No. G. 149
Encls.

Office of Senior Surgeon, Mysore Govt.

Dated, Bangalore, 14th November 1916
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D 1543

From

Rajakarya Pravina

Rao Bahadur T. V. Arumugam Mudaliar, Esq., M. B., C. M.,

Senior Surgeon with the Government of

H. H. the Maharaja of Mysore, Bangalore.

med 71-15-10

To

The Secretary to the Government of

H. H. the Maharaja of Mysore,

General Deptt., Bangalore.

Sir,

With reference to your letter No.1599-Med.71-15-9, dated the 26th August 1916, I have the honor to state that the meeting of the Committee which had been fixed for the 27th of September 1916 had to be put off on account of the unavoidable absence of some of the members from Bangalore.

2. The adjourned meeting was held yesterday (13th inst) when all the members were present, except Mr.K.S.Doresami Iyer who could not attend owing to indisposition.

3. After prolonged discussion, the committee have suggested the following curriculum for the course of studies for students of the Ayurvedic Vidyasala:-

FIRST YEAR.

Elementary	Anatomy	Hospital work in the mornings.
-Do-	Physoilogy	
-Do-	Materia Medica (English & Indian)	

SECOND YEAR.

-Ditto-

Anatomy.
Physiology
Materia Medica,
First Aid,
Hygiene & Sanitation.

THIRD & FOURTH YEARS.

Full course in Ayurveda.

4. The committee have also agreed that Dr.P.S.Achyuta Rao abd Rajakarya Pravina, Rao Bahadur Mr.T.V.Arumugum be requested to draw up a detailed syllabus of the courses of studies in the first and second years' subjects and that Rajamantra Pravina, Dewan Bahadur J.S.Chakravarti and Mr.G. Aravamudu Iyengar be requested to draw up a syllabus of the course of studies in Ayurveda.

5. The members also suggest that for non-Ayurvedic students wishing to qualify themselves as purely Rural Medical Practitioners on western lines, a course in Medicine Surgery and Midwifery be prescribed for the third year. A suggestion on this point was, however, not called for in your letter under reply.

I have the honor to be,

Sir,

Your most obedient servant,

T.V. Arumugum

Senior Surgeon.

Draft for approval

Proceedings of the Government of H.H.the Maharaja of Mysore.

Read:-

Government Order No.5926-30/Med.71-15-7 dated 12th February 1916 consisting of the appointing a committee/~~of officers~~ ~~and~~ gentlemen noted in the margin to examine the scheme suggested by the Comptroller in his printed note on 'The problem of Medical Relief' in rural parts, elaborate details and submit definite recommendations to Government in the matter.

Senior Surgeon.
Revenue Commissioner
Mr.Aravamudu Iyengar.
" J.S.Chakarvarti.
" P.S.Achyuta Rao.

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2. Correspondence ending with letter No.G.149 dated the 14th November 1916 from the Senior Surgeon forwarding the Committee's report together with his opinion in the matter and a note by Mr.P.S.Achyuta Rao embodying his individual suggestions.

Order No. 545-50 Med 71-15-11

Dated Bangalore, the 27-7-1917.

The committee make the following recommendations:-

(a) That an institution on the lines elaborated in Appendix B of their report ~~may~~ be opened at Bangalore for the training of rural medical ---- practitioners

(b) The existing Ayurvedic College should work in co-ordination with the new institution and should -- therefore be transferred to Bangalore.

(c) That a definite promise of employment should be held out to successful candidates passing out of the new institution.

(d) That after two years training in the new institution such of the successful candidates as are desirous of qualifying themselves as Ayurvedic Vidwans should be given a further two years training in the Theory and Practice of Ayurveda.

(e) That the following curriculum be prescribed for students of the --- Ayurvedic Vaidyasala.

First year.

Elementary	Anatomy.	
Do	Physiology	Hospital work in the morning.
Do	Materia Medica (English and Indian).	

Second year.

Anatomy	
Physiology	
Materia Medica.	--Do--
First aid	
Hygine and Sanitation.	

Third and Fourth years.

Full course in Ayurveda.

Senior Surgeon
Opn from the Committee members

2. Government observe that no ~~the Committee are divided in opinion as regards the proposal to open~~ is required separate school/for training rural medical practitioners and that it is not desirable to shift the Ayurvedic College from Mysore to Bangalore. As a medical school has been recently opened at Bangalore such of the -- successful pupils of the Ayurvedic College as are desirous of taking a special course of training in Western medicine may do so in the above school. The Senior Surgeon is requested to report in consultation with the principal of the local medical school what arrangements will be necessary to afford facilities for such candidates. Government approve of the curriculum relating to the study of the Western system of medicine as recommended by the Committee and direct that the --- curriculum of the Ayurvedic College laid down in Government Order No. 3540 /Muz.336-13-2 dated 26th June 1914 be modified accordingly.

3. Govt

As proposed by the Committee the Senior Surgeon and Mr.P.S. Achyuta Rao will be requested to draw up a detailed syllabus of the courses of studies in the first and second years' - subjects and Rajamantrapravina Dewan Bahadur Mr.J.S. Chakravarti and Mr. Aravamudu Iyengar of the course of studies in A. Ayurveda.

4. The entertainment in service of the successful candidates of the Ayurvedic College shall continue to be ---- optional with Government and the Local bodies.

17.7.17.

10/7

Secretary to Government,
General Department.

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To

The Senior Surgeon in Mysore.

" Comptroller to Government.

" Superintendent, Muzrai Deptt.
and
" Joint Secretary to Government.

" Revenue Commissioner in Mysore.

J.S.Chakravarti Esq.

Mr.P.S.Achyuta Rao. Sy.

K.P.

B.K.M.